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PTO/SB/21 (08-00)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/875,361	
	Filing Date	June 5, 2001	
	First Named Inventor	Su-Chen CHANG	
	Group Art Unit	1634	
	Examiner Name	A. Chakrabarti	
Total Number of Pages in This Submission	5	Attorney Docket Number	205032000500

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Issue Fee Transmittal Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	MORRISON & FOERSTER LLP Kate H. Murashige - 29,959
Signature	<i>Kate H. Murashige</i>
Date	July 22, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313, on the date shown below.	
Dated: 7/22/03	Signature: <i>Tami M. Procopio</i> (Tami Procopio)



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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Complete if Known

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Group Art Unit	1634
Attorney Docket No.	205032000500

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 980.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 03-1952

Deposit Account Name Morrison & Foerster LLP

The Commissioner is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	750	2001	375	Utility filing fee	
		1002	330	2002	165	Design filing fee	
		1003	520	2003	260	Plant filing fee	
		1004	750	2004	375	Reissue filing fee	
		1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =		
Independent Claims	-3** =		
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1202	18	2202	9	Claims in excess of 20	
		1201	84	2201	42	Independent claims in excess of 3	
		1203	280	2203	140	Multiple dependent claim, if not paid	
		1204	84	2204	42	** Reissue independent claims over original patent	
		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for ex parte reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55			Extension for reply within first month	
1252	410	2252	205			Extension for reply within second month	
1253	930	2253	465			Extension for reply within third month	
1254	1,450	2254	725			Extension for reply within fourth month	
1255	1,970	2255	985			Extension for reply within fifth month	
1401	320	2401	160			Notice of Appeal	
1402	320	2402	160			Filing a brief in support of an appeal	
1403	280	2403	140			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55			Petition to revive - unavoidable	
1453	1,300	2453	650			Petition to revive - unintentional	
1501	1,300	2501	650			Utility issue fee (or reissue)	650.00
1502	470	2502	235			Design issue fee	
1503	630	2503	315			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	750	2809	375			Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375			For each additional invention to be examined (37CFR 1.129(b))	
1801	750	2801	375			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
Other fee (specify)						10 extra copies and Publication Fee	330.00

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 980.00

SUBMITTED BY

Name (Print/Type)	Kate H. Murashige	Registration No. (Attorney/Agent)	29,959	Telephone	(858) 720-5112
Signature	Kate H. Murashige	Date	July 22, 2003		

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Dated: 7/22/03 Signature: Sami M Procopio (Tami Procopio)